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ALTERNATIVE TD PTO/SB/08A/B (09/06)

| Substitute for form 1449/PTO |                           |         |             | Complete If Known      |                        |  |
|------------------------------|---------------------------|---------|-------------|------------------------|------------------------|--|
| "                            | Daniale for form 1449/FTO |         |             | Application Number     | 10/690,258-Conf. #3419 |  |
| 111                          | NFORMATION                | N DIS   | SCLOSURE    | Filing Date            | October 21, 2003       |  |
| l s                          | TATEMENT I                | BY A    | PPLICANT    | First Named Inventor   | Oscar A. Chappel       |  |
| -                            |                           |         |             | Art Unit               | 3626                   |  |
|                              | (Use as many sh           | eets as | necess ary) | Examiner Name          | Not Yet Assigned       |  |
| Sheet                        | 1                         | of      | 1           | Attorney Docket Number | 92717-00344USP1        |  |

|                       |              |  | U.S. PA                        | TENT DOCUMENTS                                     |
|-----------------------|--------------|--|--------------------------------|--|
| Examiner<br>Initials* | Cite<br>No.1 | Document Number  Number-Kind Code <sup>2</sup> (# known) | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document |
|                       |              |  |                                |  |

|                       |              | FOREIG   | ON PATENT                         | DOCUMENTS  | _  |
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| Examiner<br>Initials* | Cite<br>No.1 | Foreign Patent Document  Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>4</sup> (if known) | Publication<br>Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | т. |
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"EXAMINER: Initial information considered, whether or not citation is in conformance with MPEP 099. Draw line through citation if not in conformance and not considered, include category of his form with next communication is applicant." Applicant's unique citation designation number (optional). "See Kinds Codes of applicant and the community by the re-best code (WPO Sanaderd ST.). "For applicant state of the community of the re-best code (WPO Sanaderd ST.). "For applicant state of the community of the re-best code (WPO Sanaderd ST.). "For a re-best code (WPO Sanaderd ST.) and the specific state of the community of the specific state of the community of the specific state of the community of the community of the specific state of the community of the specific state of the community of the commun

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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered, include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.

| Examiner Signature /Linh Giang Le/ | Date<br>Considered | 02/15/2009 |
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